

# **FEE CALCULATION SHEET** (FOR USE WITH FORM PTO-875)

SERIAL NO.  
**10/567780**  
APPLICANT(S)

FILING DATE

## **CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3						
4		1				
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TOTAL IND.			1			
TOTAL DEP.			10			
TOTAL CLAIMS			11			

PTO-1360 (REV. 11/84)

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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